02-12-08

AMEN	Docket No. 56792(71699)										
Applicatio		Filing (		Examiner		Art Unit					
10/500,838-Cd	onf. #1171	February 2, 2005 A. M. H			s 1643						
Applicant(s): Daniel W. Chan et al.											
Invention: BIOMARKERS FOR DETECTING OVARIAN CANCER											
TO THE COMMISSIONER FOR PATENTS											
Transmitted herewith is an amendment in the above-identified application.											
The fee has been calculated and is transmitted as shown below.											
CLAIMS AS AMENDED											
	Claims Remaining After	Highest Number Previously	Number Extra Claims Present	Rate							
Total Claims	Amendment	Paid - 20 =	Present	Rate X							
Independent Claims		- 3 =		x							
Multiple Depend	lent Claims (ch	eck if applicabl	e)	I							
Other fee (pleas	525.00										
TOTAL ADDIT	ONAL FEE FO	OR THIS AME	NDMENT:			525.00					
Large Entity				x Small Entity							
No additiona	al fee is require	d for this ame	ndment.								
No additional fee is required for this amendment.    X   Please charge Deposit Account No. 04-1105 in the amount of \$ 525.00 .    A duplicate copy of this sheet is enclosed.											
				the filing fee is enc	losed.						
=	credit card. F										
The Director is hereby authorized to charge and credit Deposit Account No											
	ny overpaymei	• •									
		$\wedge$	on processing	fees required under 3	37 CFR 1.	16 and 1.17.					
Dated: February 11, 200											
Jonathan M. Sparks, Ph.D. Attorney/Agent Reg. No.: 53,624											
EDWARDS AN P.O. Box 55874		R & DODGE L	LP								
Boston, Massachusetts 02205 (617) 517-5543											
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Application No. (if known): 10/500,838

Attorney Docket No.: 56792(71699)

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM 005395720 US in an envelope addressed to:

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

February 11, 2008

Date				
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Jonathan M.	Sparks, Ph.D.			
Typed or printed name of	person signing Certificate			
53,624	(617) 517-5543			
Registration Number if applicable	Telephone Number			

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Amendment Transmittal (1 page)

Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1

page)

Amendment in Response to Non-Final Office Action (9 pages)

Charge \$525.00 to deposit account 04-1105

PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08	/2004.		Complete if Known								
Fees pursuant to the Consolidated Approp	B). Application Nu			10/500,838-Conf. #1171							
FEE TRANS	Filing Date			February 2, 2005							
For FY 2		First Named In	First Named Inventor Daniel W. C			an					
FOIFIZ	000	Examiner Nam	e A	M. Harris							
X Applicant claims small entity sta	Art Unit	Attoric		1643							
TOTAL AMOUNT OF PAYMENT	(\$) 525.00	Attorney Docke	Attorney Docket No. 56792(71699)								
METHOD OF PAYMENT (check	all that apply)										
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: The Johns Hopkins University											
For the above-identified dep	osit account, the Directo	or is hereby authoriz	zed to: (checl	k all that apply)							
x Charge fee(s) indicate	d below	Char	ge fee(s) indi	icated below, ex	cept for th	ne filing fee					
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION			,								
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES										
F		SEARCH FEES		ATION FEES							
Application Type Fee (S	Small Entity Fee (\$) Fee	Small Entity (\$) Fee (\$)	( Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)					
Utility 310		10 255	210	105							
Design 210		00 50	130	65							
Plant 210		10 155	160	80							
Reissue 310		10 255	620	310							
Provisional 210	105	0 0	0	0	•						
	103	0 0	U	U		Constitut					
2. EXCESS CLAIM FEES					Fee (\$)	Small Entity Fee (\$)					
Fee Description Each claim over 20 (including Reiss	sues)				50	25					
Each independent claim over 3 (incl		210	105								
Multiple dependent claims	J ,				370	185					
Total Claims Extra Claims	Fee (\$) Fe	e Paid (\$)	Mu	ltiple Depende	ent Claims						
	x =		Fee (\$) Fee			5)					
HP = highest number of total claims paid fo	r, if greater than 20.										
Indep. Claims Extra Claims	Fee (\$) Fe	ee Paid (\$)				_					
- 3 = X = HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION SIZE FEE											
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets Extra Shee		th additional 50 or fr		Fee (\$)	Fee f	Paid (\$)					
					=						
4. OTHER FEE(S)											
Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surcharge): 2263 Extension for response within third month 525.00											
SUBMITTED BY											
Signature	KAN)	Registration No. (Attorney/Agent)	53,624	Telephone	(617) 517	7-5543					
Name (Print/Type) Jonathan M. Spa	Date I	February 1	11, 2008								
<del></del>											